Appendix V: Notice of Intent (NOI), Notice of Change (NOC), and Notice of Termination (NOT) Forms & Instructions

I. Suggested Notice of Intent (NOI) Form

In order to be covered by the remediation general permit (RGP), applicants must submit a written Notice of Intent (NOI) to EPA Region I and the appropriate state agency. A complete NOI must contain the information required by the following NOI instructions.

A. Instructions for the Suggested Notice of Intent (NOI) - At a minimum, the Notice of Intent must include the following for each individual facility or site. Additional information may be attached as needed.

1. General facility/site information.

a) Provide the **facility/site** name, mailing address, and telephone and fax numbers. Provide the facility SIC code(s). Provide the facility/site location, including longitude and latitude of the discharge.
b) Provide the facility **owner's (applicant's)** name, address, email address, telephone and fax numbers, if different from the facility/site information.
Indicate whether the owner is a Federal, State, Tribal, private, or other entity.
c) Provide the **site operator's** (requesting company's, e.g., remediation consultant's) name, mailing address, telephone and fax numbers, and email address if different from the owner's information.
d) For the site for which the application is being submitted, indicate whether:

1) a prior NPDES permit exclusion has been granted for the discharge (if so, provide the tracking number of the exclusion letter);
2) a prior NPDES application (Form 1 & 2C) has ever been filed for the discharge (if so, provide the tracking number and date that the application was submitted to EPA);
3) the discharge is a "new discharge" as defined by 40 CFR 122.2; and
4) for sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting.

e) Indicate whether there is any ongoing state permitting, licensing, or other action regarding the facility or site which is generating the discharge. If "yes," provide any site identification number assigned by the state of NH or MA, any permit or license number assigned, and the state agency contact information (e.g. name, location, telephone no.).
f) Indicate whether or not the facility is covered by other EPA permits including: the multi-sector storm water general permit; the phase I or II construction storm water general permit; an individual NPDES permit; or, any other water quality related individual or general permit. If so, provide permit tracking number(s).

2. Discharge information.

a) Describe the discharge activities to be covered by the permit. Indicate on the checklist which types of activities are involved in the discharge. See the Fact Sheet for a description of the types of categories and sub-categories of activities are covered by the general permit. Attach additional sheets as needed.
b) Describe each discharge, providing:

1) the number of discharge points;

2) the **maximum** and **average flow rate** of the discharge in cubic feet per second. For the average flow magnitude, include the units and appropriate notation if this value is a calculated design value or estimate if technical/design information is not available;
3) the latitude and longitude of each discharge with an accuracy of 100 feet;
4) the discharge's flow;
5) indication whether the discharge(s) is intermittent or seasonal

c) Provide the expected start and end dates of discharge (month/day/year), indicating whether the discharge is ongoing.

d) Attach a line drawing or flow schematic showing water flow through the facility including:
1) sources of intake water;
2) contributing flow from the operation;
3) treatment units; and
4) discharge points and receiving waters(s).

3. Contaminant information.

In the NOI, applicants must indicate which of the sub-categories listed in Table V of Part I.C of the RGP their discharges fall within.

1) If the site falls within more than one sub-category, the applicant must provide the information required on the NOI for all sub-category specified pollutants unless certified as "not present" based on laboratory data from a minimum of one sample.
2) If the site falls within one of the sub-categories, but contains additional chemicals listed in Appendix III of the permit which are not specified in the list of presumptive chemicals, the applicant must also supply the information required on the NOI for the known chemicals.
3) If the applicant believes that pollutants exist in addition to those listed in Appendix III of the permit, the applicant must describe those contaminants on the NOI. Subsequently, the Director will decide if the RGP can apply or if the individual permit is necessary.

Fill in the table &/or attach a narrative description with information about the suspected or known contamination at the site. If the applicant knows or suspects that a listed chemical is present at the site, the applicant must check the "**Believe Present**" box and provide the following information, including:

a) the number of samples taken (minimum of one sample);
b) the type of sample (e.g. groundwater, surface water, soil);
c) the analytical method used, including the method number;
d) the minimum level (ML) of the method used (see Appendix VI);
e) the maximum amount (concentration and mass) of each pollutant, based on any screening or other sampling data available; and
f)the average amount (concentration and mass) of each pollutant, based on any screening or other sampling data available.

If the applicant believes that certain chemicals listed are **not** present in the waters to be discharged, then the applicant may check the "**Believe Absent**" box. In order to certify that the chemical is believed absent, the applicant must have laboratory analysis of at least one sample

from the site to indicate that the chemicals are not present or below the minimum level of the method used.

If ***additional*** contaminants are believed to be present, the applicant should fill in boxes a) through f) for each on the line marked "Other" using additional sheets as needed.

If any ***metals*** are believed present in the potential discharge, the applicant must follow the 2 step calculation procedures described below to determine the reasonable potential and dilution factor for each metal. Before applying a dilution factor, applicants must first determine if the undiluted effluent would have the "reasonable potential" for violation of the applicable water quality standard (WQS) and whether there is a need for additional treatment specific to metals removal. Applicants must follow the two step process described below to determine if dilution for metals is appropriate and, if so, which limit in Appendix IV of the RGP applies to their discharge.

Determination of Reasonable Potential and Allowable Dilution for Discharges of Metals

a. ***Step 1: Initial Evaluation***

1) The applicant must evaluate all metals known or suspected to be present in the discharge subject to this permit, including "naturally occurring" metals such as dissolved and/or total Iron. Applicants must enter the highest detected concentration of the metal at zero dilution in the "Maximum value" column of the NOI.

2) Based on the maximum concentration of each metal, the applicant must perform an initial evaluation assuming zero dilution in the receiving water. The applicant must compare the metals concentrations in the untreated (intake) waters to the limits contained in Appendix III.

i. Potential discharges with metals with concentrations below these concentrations may be excluded from further evaluation under step 2.

ii. Potential discharges with metals with concentrations below these concentrations are not subject to permit limitations or monitoring requirements.

b. ***Step 2: Calculation of Dilution Factor***

1) **For applicants in NH**: If a metal concentration in the discharge exceeds the limits in Appendix III with zero dilution, the applicant must evaluate the potential concentration considering a dilution factor (DF) using the formula below. For sites in New Hampshire, the applicant must contact NH DES for the 7Q10 and dilution factor.

DF = [(Qd + Qs)/Qd] X 0.9

Where: DF = Dilution Factor
Qd = Permitted flow rate of the discharge in cubic feet per second (cfs) (1.0 gpm = .00223 cfs)

Qs = **Receiving water 7Q10 flow,in cfs, where,**
7Q10 = **The annual minimum flow for 7 consecutive days with a recurrence interval of 10 years**
0.9 = **Allowance for reserving 10% of the assets in the receiving stream as per Chapter ENV-Ws 1700, Surface Water Quality Regulations**

i. Using the DF calculated from the formula above, the applicant must refer to the corresponding DF range column in Appendix IV. The applicant then compares the maximum concentration of the metal entered on the NOI to the corresponding total recoverable metals limits listed in Appendix IV.

1. If the intake (untreated) water concentrations are less than the limit stated in Appendix IV, the applicant does not need to limitation or monitoring that metal.
2. For any metals exceeding the limits in Appendix IV, the applicant must treat or control the effluent to less than the limit prior to discharge.

ii. The applicant must submit the results of this calculation as part of the NOI. EPA and NH DES will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

2) **For applicants in MA**: If a metal concentration in the discharge exceeds the limits in Appendix III with zero dilution, the applicant must evaluate the potential concentration considering a dilution factor (DF) using the formula below.

DF = (Qd + Qs)/Qd

Where:
DF = **Dilution Factor**
Qd = **Maximum flow rate of the discharge in cubic feet per second (cfs) (1.0 gpm = .00223 cfs)**
Qs = **Receiving water 7Q10 flow where,**
7Q10 = **The minimum flow for 7 consecutive days with a recurrence interval of 10 years**

i. The applicant may estimate the 7Q10 for a receiving water by using available information such as nearby USGS stream gauging stations directly or by application of certain "flow factors," using historic streamflow publication information, calculations based on drainage area, information from state water quality offices, or other means. In many cases the states of MA have calculated 7Q10 information using "flow factors" for a number of streams in the state. The source of the low flow value(s) used by the applicant must be included on NOI application form. Flow data can also be obtained from web applications such as STREAMSTATS located at: http://ma.water.usgs.gov/streamstats/.
ii. i. Using the DF calculated from the formula above, the applicant must refer to

the corresponding DF range column in Appendix IV. The applicant then compares the maximum concentration of the metal entered on the NOI to the corresponding total recoverable metals limits listed in Appendix IV.

1. If the intake (untreated) water concentrations are less than the limit stated in Appendix IV, the applicant does not need to limitation or monitoring that metal.

2. For any metals exceeding the limits in Appendix IV, the applicant must treat or control the effluent to less than the limit prior to discharge.

iii. The applicant must submit the results of this calculation as part of the NOI. EPA and NH DES will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

4. Treatment system information.

a) Describe the treatment train for each discharge and attach a schematic of the proposed or existing treatment system.

b) Identify each major treatment unit (e.g. frac tanks, filters, air stripper, liquid phase/vapor phase activated carbon, oil/water separators, etc.) by checking all that apply and describing any additional equipment not listed. Provide a written description of how the system train will be set up. Attach additional sheets as needed.

c) Provide the proposed **average** and **maximum flow** rates (in gallons per minute, gpm) for the discharge and the **design flow** rates (in gpm) of the treatment system. Clearly identify the component of the treatment with the most limiting flow, i.e., the part of the treatment train that establishes the **design flow**.

d) Describe any chemical additives being used or planned to be used and attach MSDS sheets for each. EPA may request further information regarding the chemical composition of the additive, potential toxic effects, or other information to insure that approval of the use of the additive will not cause or contribute to a violation of state water quality standards. Approval of coverage under the RGP will constitute approval of the use of the chemical additive(s). If coverage of the discharge under the RGP has already been granted and the use of a chemical additive becomes necessary, the permittee must submit a Notice of Change (NOC).

5. Receiving surface water(s) information.

a) Identify the discharge pathway by checking whether it is discharged: directly to the receiving water, within the facility (e.g., through a sewer drain), to a storm drain, to a river or brook, to a wetland, or other receiving body.

b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters into which discharge will occur.

c) A detailed map(s) indicating the site location and location of the outfall to the receiving water:

1) For multiple discharges, the discharges should be numbered sequentially.

2) In the case of indirect dischargers (to municipal storm sewer, etc) the map(s) must be sufficient to indicate the location of the discharge to the indirect conveyance and the discharge to the state classified surface water. The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping).

d) the state water quality classification of the receiving water and the basin;

e) specify the reported seven day-ten year low flow (7Q10) of the receiving water. In New

Hampshire, the 7Q10 must be provided by to the applicant by the New Hampshire Department of Environmental Services***;***

f) Indicate whether the receiving water is a listed 303(d) water quality impaired or limited water and if so, for which pollutants (see Section VII.H. of the Fact Sheet for additional information). Also, indicate if there is a TMDL for any of the listed pollutants. For MA, the list of waters can be found at: http://www.mass.gov/dep/brp/wm/tmdls.htm and for NH: http://oaspub.epa.gov/waters/state_rept.control?p_cycle=1998&p_state=NH. For more information, contact the states at: New Hampshire Department of Environmental Services, Watershed Management Bureau at 603-271-3503 or the Massachusetts Department of Environmental Protection at 508-767-2796 or 508-767-2873;

g) Indicate whether any listed threatened or endangered species, designated critical habitat, or essential fish habitat, are in proximity to the discharge to be covered by this permit and whether any consultation with the Services is complete or underway. See Part I.B.4 and Appendices II and VII, section I, for additional information regarding endangered species and consultation.

h) Indicate whether or not there are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge (see http://www.cr.nps.gov/nr/research/nris.htm), and whether any state or tribal historic preservation officer (SHPO or THPO) was consulted in such a determination (for Massachusetts sites only). See Appendix VII, section II for additional information pertaining to historic places.

6. Results of Consultation with Federal Services - Facilities that intend to be covered under the Massachusetts or New Hampshire general permit and that discharge to certain water bodies must also submit a formal certification with the Notice of Intent that indicates the consultation, with the U.S. Fish and Wildlife Service and National Marine Fisheries Service (the Services), resulted in either a no jeopardy opinion or a written concurrence on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat. Facilities should begin the consultation as early in the process as possible. See Part I.B.4 and Appendices II and VII, section I, for additional information regarding endangered species and consultation.

7. Supplemental information. Applicants should provide any supplemental information needed to meet the requirements of the permit, including, any analytical data used to support the application, and any certification(s) required.

8. Signature Requirements - The Notice of Intent must be signed by the applicant in accordance with the signatory requirements of 40 CFR Section 122.22. Additionally, the NOI must be signed and stamped by a professional engineer.

B. Suggested Form for Notice of Intent (NOI) for the Remediation General Permit

1. General site information. Please provide the following information about the site:

<table>
<tr><td colspan="2">a) Name of facility/site:</td><td colspan="4">Facility/site address:</td></tr>
<tr><td colspan="2">Location of facility/site within 100 feet:
longitude:_____ latitude:_____</td><td>Facility SIC code(s):</td><td colspan="3">Street:</td></tr>
<tr><td colspan="3">b) Name of facility/site owner (applicant):</td><td colspan="3">Town:</td></tr>
<tr><td colspan="3">Email address of owner:</td><td>State:</td><td>Zip:</td><td>County:</td></tr>
<tr><td colspan="3">Telephone no.of facility/site owner (applicant):</td><td></td><td></td><td></td></tr>
<tr><td colspan="3">Fax no. of facility/site owner (applicant):</td><td colspan="3" rowspan="2">Owner is (check one): 1. Federal____ 2. State/Tribal_____
3. Private_____ 4. other _____, if so, describe:</td></tr>
<tr><td colspan="3">Address of owner:(if different from site):</td></tr>
<tr><td colspan="6">Street:</td></tr>
<tr><td colspan="2">Town:</td><td>State:</td><td>Zip:</td><td colspan="2">County:</td></tr>
<tr><td colspan="2" rowspan="2">c) Legal name of operator (requesting company):</td><td colspan="4">Operator telephone no:</td></tr>
<tr><td colspan="2">Operator fax no.:</td><td colspan="2">Operator email:</td></tr>
<tr><td colspan="6">Operator contact name and title:</td></tr>
<tr><td colspan="2">Address of operator (if different from owner):</td><td colspan="4">Street:</td></tr>
<tr><td colspan="2">Town:</td><td>State:</td><td>Zip:</td><td colspan="2">County:</td></tr>
<tr><td colspan="6">d) Check “yes” or “no” for the following:
1. Has a prior NPDES permit exclusion been granted for the discharge? Yes___ No___, if “yes,” number:
2. Has a prior NPDES application (Form 1 & 2C) ever been filed for the discharge? Yes___ No___, if “yes,” date and tracking #:
3. Is the discharge a “new discharge”as defined by 40 CFR 122.2? Yes___ No___
4. For sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting? Yes__ No__</td></tr>
</table>

e) Is site/facility subject to any state permitting or other action which is causing the generation of discharge? Yes___ No___ If "yes," please list: 1. site identification # assigned by the state of NH or MA: 2. permit or license # assigned: 3. state agency contact information: name, location, and telephone number:	f) Is the site/facility covered by any other EPA permit, including: 1. multi-sector storm water general permit? Y___ N___, if Y, number: 2. phase I or II construction storm water general permit? Y___ N___, if Y, number: 3. individual NPDES permit? Y___ N___, if Y, number: 4. any other water quality related permit? Y___ N___, if Y, number:

2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed) including:

<table>
<tr><td colspan="5">a) Describe the discharge activities for which the owner/applicant is seeking coverage:</td></tr>
<tr><td colspan="5">Check the type(s) of de-watering activity involved in the discharge:</td></tr>
<tr><td colspan="3">Fuel storage tank replacement or removal_____, check if gasoline_____
or other petroleum products_____</td><td colspan="2">Contaminated construction material____</td></tr>
<tr><td>Hydrostatic testing_____</td><td>Aquifer pump testing____</td><td>Utility vaults or manholes_____</td><td colspan="2" rowspan="2">Other (please describe):</td></tr>
<tr><td>Groundwater recovery & treatment (pump & treat) __</td><td>Contaminated dredge condensates_____</td><td>Contaminated sumps_____</td></tr>
<tr><td>b) Describe each discharge, including:</td><td>1) Number of discharge points:</td><td colspan="3">2) What is the maximum and average flow rate of discharge (in cubic feet per second, ft3/s)? Max. flow_____ Average flow_____ Is average flow a design value? Y___ N____
For average flow, include the units and appropriate notation if this value is a design value or estimate if not available.</td></tr>
<tr><td colspan="5">3) Latitude and longitude of each discharge within 100 feet: pt.1:long._____ lat._____; pt.2: long._____ lat._____; pt.3: long._____ lat._____; etc.</td></tr>
<tr><td colspan="3">4) Total contributing flow of the discharge (gals/minute):</td><td colspan="2">5) Is the discharge intermittent_____or seasonal_____?</td></tr>
<tr><td colspan="3">c) Expected dates of discharge (mm/dd/yy):
start_____ end_____</td><td colspan="2">Is discharge ongoing
Yes ____ No_____?</td></tr>
<tr><td colspan="5">d) Please attach a line drawing or flow schematic showing water flow through the facility including:
1. sources of intake water, 2. contributing flow from the operation, 3. treatment units, and 4. discharge points and receiving waters(s).</td></tr>
</table>

3. Contaminant information.

a) Applicants must check the box of which of the sub-categories the proposed discharges fall within:

Gasoline Only	VOC Only	Primarily Metals	Urban Fill Sites	Contaminated Sumps	Utility Vaults & Manholes	Aquifer Testing
Fuel Oils (and Other Oils) only	VOC with Other Contaminants	Petroleum with Other Contaminants	Listed Contaminated Sites	Contaminated Dredge Condensates	Hydrostatic Testing of Pipelines/Tanks	Well Development or Rehabilitation

b) Please describe the following for all known or suspected contaminants and attach additional sheets as needed:

PARAMETER	Believe Present	Believe Absent	# of Samples	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML)	Maximum value		Avg. Value	
							concentration	mass	concentration	mass
1. Total Suspended Solids										
2. Total Residual Chlorine										
3. Total Petroleum Hydrocarbons										
4. Cyanide										
5. Benzene										
6. Toluene										
7. Ethylbenzene										
8. (m,p,o) Xylenes										
9. Total BTEX[1]										

[1] BTEX = Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

PARAMETER	Believe Present	Believe Absent	# of Samples	Type of Sample (e.g., grab)	Analytical Method Used	Minimum Level (ML)	Maximum value		Avg. Value	
							concentration	mass	concentration	mass
10. Ethylene Dibromide [2] (1,2- Dibromo-methane)										
11. Methyl-tert-Butyl Ether (MtBE)										
12. tert-Butyl Alcohol (TBA)										
13. tert-Amyl Methyl Ether (TAME)										
14. Naphthalene										
15. Carbon Tetra-chloride										
16. 1,4 Dichlorobenzene										
17. 1,2 Dichlorobenzene										
18. 1,3 Dichlorobenzene										
19. 1,1 Dichloroethane										
20. 1,2 Dichloroethane										
21. 1,1 Dichloroethylene										
22. cis-1,2 Dichloro-ethylene										
23. Dichloromethane (Methylene Chloride)										
24. Tetrachloroethylene										
25. 1,1,1 Trichloroethane										

[2] EDB is a groundwater contaminant at fuel spill and pesticide application sites in New England.

PARAMETER	Believe Present	Believe Absent	# of Samples	Type of Sample (e.g., grab)	Analytical Method Used	Method Detection Limit	Maximum value		Avg. Value	
							concentration	mass	concentration	mass
26. 1,1,2 Trichloroethane										
27. Trichloroethylene										
28. Vinyl Chloride										
29. Acetone										
30. 1,4 Dioxane										
31. Total Phenols										
32. Pentachlorophenol										
33. Total Phthalates [3] (Phthalate esthers)										
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]										
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)										
a. Benzo(a) Anthracene										
b. Benzo(a) Pyrene										
c. Benzo(b)Fluoranthene										
d. Benzo(k) Fluoranthene										
e. Chrysene - 218019 -										
f. Dibenzo(a,h) anthracene										

[3] The sum of individual phthalate compounds.

PARAMETER	Believe Present	Believe Absent	# of Samples	Type of Sample (e.g., grab)	Analytical Method Used	Method Detection Limit	Maximum value		Avg. Value	
							concentration	mass	concentration	mass
g. Indeno(1,2,3-cd) Pyrene - 193395 -										
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)										
h. Acenaphthene										
i. Acenaphthylene										
j. Anthracene										
k. Benzo(ghi) Perylene										
l. Fluoranthene										
m. Fluorene										
n. Naphthalene-										
o. Phenanthrene										
p. Pyrene										
37. Total Polychlorinated Biphenyls (PCBs)										
38. Antimony										
39. Arsenic										
40. Cadmium										
41. Chromium III										
42. Chromium VI										
43. Copper										
44. Lead										
45. Mercury										

PARAMETER	Believe Present	Believe Absent	# of Samples	Type of Sample (e.g., grab)	Analytical Method Used	Method Detection Limit	Maximum value		Avg. Value	
							concentration	mass	concentration	mass
46. Nickel										
47. Selenium										
48. Silver										
49. Zinc										
50. Iron										
Other (describe):										

c) For discharges where **metals** are believed present, please fill out the following:

Step 1: Do any of the metals in the influent have a **reasonable potential** to exceed the effluent limits in Appendix III (i.e., the limits set at zero to five dilutions)? Y____ N____	If yes, which metals?
Step 2: For any metals which have **reasonable potential** to exceed the **Appendix III** effluent limits, calculate the **dilution factor (DF)** using the formula in Part I.A.3 of the NOI instructions or VI.B.38-50 of the Fact Sheet. What is the dilution factor for applicable metals? Metals:_____ DF: _____	Look up the limit calculated at the corresponding dilution factor in **Appendix IV.** Do any of the metals in the **influent** have the potential to exceed the corresponding **effluent** limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)? Y____ N____ If "Yes," list which metals:

4. Treatment system information. Please describe the treatment system using separate sheets as necessary, including:

a) A description of the treatment system, including a schematic of the proposed or existing treatment system:						
b) Identify each applicable treatment unit (check all that apply):	Frac. tank	Air stripper	Oil/water separator	Equalization tanks	Bag filter	GAC filter
	Chlorination	Dechlorination	Other (please describe):			
c) Proposed **average** and **maximum flow rates** (gallons per minute) for the discharge and the **design flow rate**(s) (gallons per minute) of the treatment system: Average flow rate of discharge_____ Maximum flow rate of treatment system _____ Design flow rate of treatment system _____						
d) A description of chemical additives being used or planned to be used (attach MSDS sheets):						

5. Receiving surface water(s). Please provide information about the receiving water(s), using separate sheets as necessary:

a) Identify the discharge pathway:	Direct_____	Within facility__	Storm drain____	River/brook____	Wetlands_____	Other (describe):
b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters:						
c) Attach a detailed map(s) indicating the site location and location of the outfall to the receiving water: 1. For multiple discharges, number the discharges sequentially. 2. For indirect dischargers, indicate the location of the discharge to the indirect conveyance and the discharge to surface water The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping).						
d) Provide the state water quality classification of the receiving water_____,						
e) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water_____ Please attach any calculation sheets used to support stream flow and dilution calculations.						
f) Is the receiving water a listed 303(d) water quality impaired or limited water? Yes____ No____ If yes, for which pollutant(s)? Is there a TMDL? Yes____ No____ If yes, for which pollutant(s)?						
g) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes____No____ Has any consultation with the federal services been completed ? Yes___ No___ or is consultation underway? Yes ____ No____						
h) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge? Yes_____ No_____ Have any state or tribal historic preservation officer been consulted in this determination (Massachusetts only)? Yes_____ No_____						

6. Results of Consultation with Federal Services

What were the results of the consultation with the U.S. Fish and Wildlife Service and/or National Marine Fisheries Service: a) a "no jeopardy" opinion? or b) written concurrence on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat?

7. Supplemental information. :

Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit.

8. Signature Requirements: The Notice of Intent must be signed by the applicant in accordance with the signatory requirements of 40 CFR Section 122.22

Facility/Site Name: Signed: Title: Date:
For sites in NH, certification by Professional Engineer is required:

B. Submission of NOI to EPA - All facilities that applying for coverage under this General Permit must submit a written Notice of Intent (NOI) to EPA. Completed NOI forms should be sent to EPA at:

U.S. Environmental Protection Agency, Region I
Municipal Assistance Unit (CMU)
1 Congress Street, Suite 1100
Boston, Massachusetts 02114-2023.

or faxed to: 617-918-0551.

1. Filing with the state of New Hampshire or Commonwealth of Massachusetts - A copy of any NOI form filed with EPA-NE must also be filed with state agencies. The state agency may elect to develop a state specific form or other information requirements.

a) Discharges in Massachusetts - In addition to the NOI, permit applicants must submit copies of the State Application Form BRPWM 12, Request for General Permit coverage for the RGP. The application form and the Transmittal Form for Permit Application and Payment, may be obtained from the Massachusetts Department of Environmental Protection (MA DEP) website at www.state.ma.us/dep. Municipalities are fee-exempt, but should send a copy of the transmittal form to that address for project tracking purposes. All applicants should keep a copy of the transmittal form and a copy of the application package for their records.

1) A copy of the NOI, the transmittal form, a copy of the check, and Form BRPWM 12 should be sent to:

Massachusetts Department of Environmental Protection
Division of Watershed Management
627 Main Street, 2nd floor
Worcester, MA 01608

2) A copy of the transmittal form and the appropriate fee should be sent to:

Massachusetts Department of Environmental Protection
P.O. Box 4062
Boston, MA 02111

b) Discharges in New Hampshire - applicants must provide a copy of the Notice of Intent to:

New Hampshire Department of Environmental Services
Water Division
Wastewater Engineering Bureau
P.O. Box 95
Concord, New Hampshire 03302-0095.

2. A copy of the NOI must be submitted to the municipality in which the proposed discharge would be located.